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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STA'
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED Aug 26 1996 8:00 am Secretary of State

<u>1996</u>

DOCUMENT # P93000018351

BISCA	AYNE MARKETING INC.	AMEX	JDE!	D	Walliam Comme		
Principal Plan	ace of Business.	Mailing Address			_		
	S.E 1st. Ave.	•				•	
	I,FL 33131	125 S.E 1st					
	. 1010	MIAMI, FL	33131		2.0		
- Dinainal I					 Date Incorporated or Qualified 3/10/93 	3a. Date of Las 10/09/	st Report
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	10,000	
Suite, Apt	1 #. at:	Suite Ant # oto			65-0402936	+	Applied For Not Applica
22		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.	.75 Additiona
City & State	eb	City & State			6. Election Campaign Financing	F(ee Required
23 Zip		28		•	Trust Fund Contribution	□ \$5	5.00 May Be
24 24	Country 25	Ζφ 20	Country	⁄y	8. This corporation has liability for in	. Ad	ers 199,032
<u> </u>	9. Name and Address of Current	29 t Registered Agent	30		Florida Statutes	□ No	
CARVA	···	Unfligation California	81	1 Name	10. Name and Address of New Re	egistered Agent	
10000	ALHO,LUIZA) WEST BAY #PH-1						
	IARBOR, FL 33154		82	2 Street Addr	dress (P.O. Box Number is Not Acceptable	(6)	
	ARDON, III JOID4		83	3			
ı.•			R	 		-	
11. Pursuant	In the provinces of Captions 607 0500		B4	1	•		Zip Code
or register	o the provisions of Sections our upuz a red agent, or both, in the State of Florida	und 607.1508, Florida Statu a Such change was autho	utes, the above-	named corpor	oration submits this statement for the purp ard of directors. I hereby accept the appoi	cose of changing i	its registered c
signature	th, and accept the obligations of, Section	ก 607.0505, Florida Statute	8S.	Oralkers serve	rd of directors. I hereby accept the appor	niment as register	red agent. I an
	Signature, typed or printed name of registered agent and	out titio it aprilicative	SCOTE Devotered Ace				
12.	OFFICERS AND I	DIRECTORS	INOTE Registered Agen	il Signature required	ed when revisitating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECT	
™ILE NAME	SEDYCIAS, JOAO	☐ DELETE	1 1 TITLE		FROM TOTAL OF BUILDING TO US 1 TO	CERS AND DIRECT	
STREET ADDRESS	1775 WASHINGTON AVE	8. #14C	1.2 NAME		900001	19270	
CITY-ST-ZIP	MIAMI BEACH, FL 331	139	1.3 STREET		~~! ###################################	######################################) : -2
TITLE	VPS	[] DELETE	14 CITY-S		*****61.25	*****51	<u>.25</u>
NAME	SEDYCIAS, DINAMERIC	20	2 1 TITLE 2 2 NAME			☐ Change	
STREET ADDRESS	10000 WEST BAY #PH-	-1	23 STREET.	T ANNDESS			
CITY-ST-ZIP	BAY HARBOR, FL 3315	54	24 CITY - ST				
TITLE NAME	VPT	☐ DELETE	3 1 THILE			Change	- Additio
STREET ADDRESS	CARVALHO, LUIZA 10000 WEST BAY #PH-	•	3 2 NAME			L. V. W	e 🔲 Addition
CITY-ST-ZIP	BAY HARBOR, FL 3315		3.3 STREET	- 1			
TITLE	DAT HUNDON, IN 3313-	DELETE	3.4 CITY-ST	1-ZIP			_
NAME	1	L	4. 1 TIFLE 4.2 NAME			☐ Change	e Addition
STREET ADDRESS	I		4.2 NAME 4.3 STREET A	*nnarec			
CITY-ST-ZIP	<u> </u>		4.4 CITY-ST	ı			
TITLE NAME	ı	☐ DELETE	5. 1 TITLE	.10		Change	e 🔲 Addition
STREET ADDRESS	4		52 NAME]	(j. (j. 6)	<u> </u>	L. Austra.
CITY-ST-ZIP	1		5 3 STREET A		till 2 m		
TITLE		. DELETE	5 4 CITY - ST -	·ZIP	0.7640	k	
NAME		. La verese	6 1 TITLE		4771	Change	Addition
STREET ADDRESS			6.2 NAME 6.3 STREET A		() v		
CITY-ST-ZIP			6 3 STREET AL				
14. I do horobu	certify that the information supplied with	A) to Pr	0.4 UIT-31 ·	· ZIP			

1. To hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

TATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-09-96 (30)381-8901